GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:2482
ANSWERED ON:11.03.2016
Anaemia Among Women
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Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

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(a) whether the Government is aware of the prevalence and determinants of anaemia among women in India;

(b) the mechanism put in place by the Government for rural women suffering from anaemia particularly for women of the lower income groups and that of women with low body mass index;

(c) whether the Government provide assistance to States/UTs to establish diagnostic clinics for tests and facilitate medication to provide specialised and sustained treatment of anaemic women and if so, the details thereof; and

(d) the steps taken/proposed to be taken by the Government to spread awareness of such diseases in the country particularly in the rural and tribal areas?

Answer

THE MINISTER OF HEALTH AND FAMILY WELFARE
(SHRI JAGAT PRAKASH NADDA)
(a) & (b): As per National Family Health Survey (NFHS) - III (2005-06), prevalence of anaemia in women is 55.3%. State-wise prevalence of anaemia in women of reproductive age group (15-49 years) is placed at Annexure.

The main determinants of anaemia among women are iron loss during menstruation and post-partum haemorrhage, increased iron requirement due to tissue, blood and energy requirements during pregnancy, teenage pregnancy, repeated pregnancies with less than 2 years interval, poor iron stores from infancy, insufficient quantity of iron and iron enhancers in diet and low bioavailability of dietary iron, iron loss due to parasite load (e.g. malaria, intestinal worms), Haemoglobinopathies (Sickle cell anaemia and Thalassemia) along-with poor environmental sanitation, unsafe drinking water and inadequate personal hygiene.
The steps taken by Government to prevent and treat anaemia amongst women are as follows:
i. Ministry of Health and Family Welfare in 2013 launched "National Iron Plus Initiative" as a comprehensive strategy to combat the public health challenge of Iron Deficiency Anaemia prevalent across the life cycle. There are age specific interventions with Iron and Folic Acid Supplementation and Deworming for improving the haemoglobin levels and reducing the prevalence of anaemia for all age groups, that is children 6-59 months, 5 − 10 years, adolescent girls and boys (11-19 years), pregnant and lactating women and women in reproductive age group (20 − 49 years).

ii. Universal screening of pregnant women for anaemia is a part of ante-natal care and all pregnant women are provided iron and folic acid tablets during their ante-natal visits through the existing network of sub-centers and primary health centres and other health facilities as well as through outreach activities at Village Health & Nutrition Days (VHNDs).

iii. Every pregnant woman is given iron and folic acid, after the first trimester, to be taken 1 tablet daily for 6 months during ante-natal and post-natal period. Pregnant women, who are found to be clinically anaemic, are given additional tablet for taking two tablets daily.

iv. Government of India has given directions to the States for identification and tracking of severely anaemic cases at all the sub centres and PHCs for their timely management.

v. Health and nutrition education through IEC & BCC to promote dietary diversification, inclusion of iron folate rich food as well as food items that promotes iron absorption.

vi. To tackle the problem of anemia due to malaria particularly in pregnant women and children, Long Lasting Insecticide Nets (LLINs) and Insecticide Treated Bed Nets (ITBNs) are being distributed in endemic areas.

vii. Health management information system & Mother Child tracking system is being implemented for reporting the cases of anemic and severely anaemic pregnant women

viii. MCP Card and Safe Motherhood Booklet is being distributed to the pregnant women for educating them on dietary diversification and promotion of consumption of IFA

ix. 184 High Priority Districts (HPDs) have been identified and prioritized for Reproductive Maternal Newborn Child Health+ Adolescent (RMNCH+A) interventions for achieving improved maternal and child health outcomes.

(c): Ministry of Health & Family welfare approve funds to the states as per the proposal submitted by them in their Annual Project Implementation Plan (PIP). This includes screening and management of Anemia, including Haemoglobinopathies (Sickle cell anaemia and Thalassemia), procurement of IFA Tablets and Albendazole for pregnant and lactating women in reproductive age group (20 − 49 years), Adolescents girls and boys(11-19 years) and children 6-59 months, 5 − 10 years and any other specific proposal as per the State's PIP.

(d): The other steps taken by Government to spread awareness on Anemia in the country are:

1. Information, Education and Communication (IEC) material in the form of posters, hoardings, wall-writings and audio-visuals have been developed to promote prevention of anaemia.

2. Videos and job-aids for nutrition and health education has also been disseminated to the States/UTs.